

Application for Geisel Departmental/Org Account

Account Name Requested:

Account Requestor:

Email Address of Account Owner:

(Owner can be the requestor or the person who will manage the account.)

Rationale for Account:

Account Phone #: _____ Account Hinman Box: _____

Name of Department: _____

Account Status: New Renewal (If renewal, NetID: _____)

The account will expire at the end of the period requested or a maximum of 12 months. If the account is for sponsored research, the account may be set up for the length of the award; see note in Major Unit Department Head signature section below for authorization information. This account is requested beginning _____ for a period of _____ months.

If at the time of expiration, the Responsible Party determines that the account is still necessary, he/she may submit a request to renew this account for an additional period of time, up to 12 months.

Department Head (print): _____

Department Head (signature) _____

Date: _____

Dean's Office Approver (print): _____

Dean's Office Approver (signature): _____

Date: _____

Please return the completed form to:

Geisel Administration Hinman Box 7060 or email: geisel.dean's.office@dartmouth.edu

Effective: October 2020